PTO/SB/21 (09-04)

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2-24	- 4 1	Application Numb	per 10/540,933						
OFTRANSMIT	IAL	Filing Date	June 29, 2005						
₹ ORM		First Named Inver	ntor Shchukin						
(JAN 0 9 2007 (4)		Art Unit	3745						
to be used for all correspondence	e after initial filing)	Examiner Name	R. Edgar						
Ope used for a correspondence Total Number of Pages in This Su	bmission	Attorney Docket N	Number 004820.00007						
ENCLOSURES (check all that apply)									
Fee Transmittal Form	☑ Drawi	ing(s)	After Allowance Communication to TC						
Fee Attached	Licens	sing-related Papers	Appeal Communication to Board of Appeals and Interferences						
Amendment / Reply	Petitio	on	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
After Final		on to Convert to a sional Application	Proprietary Information						
Affidavits/declaration(s)		r of Attorney, Revocation ge of Correspondence Add	dress Status Letter						
Extension of Time Request	Termi	inal Disclaimer	Other Enclosure(s) (please identify below):						
Express Abandonment Requ	est	est for Refund	Declaration Verification Statement Claiming Small						
✓ Information Displaces States		lumber of CD(s)	Entity Status						
Information Disclosure State	nent	Landscape Table on CD							
Certified Copy of Priority Document(s)	Remarks	<u>s</u>							
Reply to Missing Parts/ Incomplete Application									
Reply to Missing Parts									
under 37 CFR1.52 or 1.5	53								
······································	SIGNATURE (OF APPLICANT, ATTO	RNEY, OR AGENT						
Firm	Banner & Witcoff, LTD.								
Signature William J. Hisher									
Printed Name	William	J. Fisher							
Date	January	9, 2007	Reg. No. 32,133						
	CERTIF	CATE OF TRANSMISS	SION/MAILING						
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Effective on 12/08/2004

HP = highest number of total claims paid for, if greater than 20.

Extra Claims

Indep. Claims

3.

- 3 or HP=

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		3).	Complete if Known					
FEE TRANSMITTAL for FY 2005				pplication Number	10/540,93	33	(Eg	
			Fi	ling Date	June 29,	2005	JAN 0 9 2007 5 \	
			Fi	rst Named Inventor	Shchukin		TAMADEN PRICE	
Applicant claims small entity status. See 37 CFR 1.27			7 E	xaminer Name	R. Edgar		a madeus pur. Co	
TOTAL AMOUNT OF PAYMENT		(a) 190.00	Ar	t Unit	3745			
		(\$) 180.00		torney Docket No.	004820.0	0007		
METHOD OF PAYMENT (check all that apply)								
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :								
Deposit Account Dep	osit Accour	nt Number: 19-073	3	Deposit Account	t Name: Bar	nner & Witc	off, LTD.	
		osit account, the Dire		– y authorized to: (ch	eck all that ap	oply)		
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Under 37	CFR 1.16 a	ind 1.17		,				
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FEE CALCULATION						· · · · · · · · · · · · · · · · · · ·		
1. BASIC FILING, SEA	DCH AN	DEVAMINATION	FEES	· · · · · · · · · · · · · · · · · · ·				
I. BASIC FILING, SEA	FILING		SEARC	H FEES	EXAMIN	ATION FEES	•	
		Small Entity		Small Entity	Small Entity			
Application Type	Fee (\$)	Fee(\$)	Fee(\$)	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	Fees Paid (\$)	
Utility	300	150	500	250	200	100	 .	
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity								
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (inc						50	25	
Each independent claim		cluding Reissues)				200 360	100 180	
Multiple dependent claims								
- 20 or HP= x = Fee (\$) Fee Paid (\$)								
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	HP = highest number of independent claims paid for, if greater than 3.
3.	APPLICATION SIZE FEE
	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer
	listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50
	sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 = ____ / 50 = ___ (round **up** to a whole number) x

Fee Paid (\$)

4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) \$180.00 Other (e.g., late filing surcharge): Consideration of Information Disclosure Statement

SUBMITTED BY					
Signature	William J. Fisher	Registration No. (Attorney/Agent)	32,133	Telephone	202-824-3000
Name (Print/Type)	William J. Fisher			Date	January 9, 2007